Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control n winder I OF DOWN Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS'AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTIT (Column 1) (Column 2) **FOR** NUMBER FILED **NUMBER EXTRA RATE** FEE RATE **BASIC FEE** (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = X \$ OR X \$ INDEPENDENT CLAIMS minus 3 =(37 CFR 1.16(b)) OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 1) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER **PRESENT** RATE ADDI-RATE ADI AMENDMENT **AFTER PREVIOUSLY EXTRA** TIONAL **401T AMENDMENT** PAID FOR FEE FE Total Minus (37 CFR 1.16(c)) X \$ X \$_ OR Independent Minus (37 CFR 1.16(b)) X \$ OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST $\mathbf{\omega}$ **PRESENT** REMAINING NUMBER RATE ADDI-RATE ADC **EXTRA** AMENDMENT **AFTER PREVIOUSLY** TIONAL TION **AMENDMENT** PAID FOR FEE FEI Total Minus (37 CFR 1,16(c)) X \$ X \$ OR Independent (37 CFR 1 16(b)) Minus X \$ OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3)

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IENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1.16(c))	·	Minus	••	=	
	Independent (37 CFR 1.16(b))	•	Minus .	•••	a	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

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RATE	ADDI- TIONAL FEE		RATE	ADC TION FEE
× \$ =		OR	x \$=	
x \$=		OR	x \$=	
+ \$ =		OR	+ ş=	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.